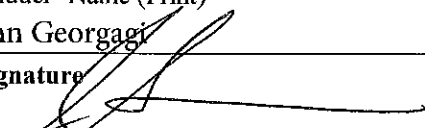


ATTACHMENT 3  
BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "**Bid Submittal - Do Not Open**".
- B. All required attachments are included with this certification sheet.
- C. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- D. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

**An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection**

1. Company Name American Integrated Services, Inc.	2. Telephone Number (310) 522-1168	2a. Fax Number (310) 522-0474
2b. Email Address jgeorgagi@americanintegrated.com		
3. Address 1502 E Opp Street, Wilmington, CA 90744		
Indicate your organization type:		
4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN) 95-4698255	8. California Corporation No. C2090479	
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number 1000003411		
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number 757133	11. PUC License Number CAL-T-	
12. Bidder's Name (Print) John Georgagi	13. Title Executive Vice President	
14. Signature 	15. Date 10/05/2016	
16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:		
a. Small Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter certification number: _____		
If yes, enter your service code below: _____		

**NOTE:** A copy of your Certification is required to be included if either of the above items is checked "Yes".

Date application was submitted to OSDS, if an application is pending: \_\_\_\_\_

ATTACHMENT 1  
Bid Proposal for Hazardous Waste Agreement

Column A	Column B	Column C	Column D	Column E	Column F
Item Number	Item Description	Unit of Measure	Estimated Quantity	Unit Cost	Total Amount (unit cost multiplied by estimated quantity)

**A. Personnel** Contractor shall ascertain the appropriate DIR craft/classification prevailing wage rates (if applicable). Worker Classifications, as listed below, are used in this Agreement to entitle a specific type of service and/or function and to cross-reference line items on this Attachment 1, Bid Proposal. These classifications are not reflective of Prevailing Wage Classifications and shall not be used for determining prevailing wage hourly rates. Also refer to this Agreement's Exhibit A, Scope of Work. \*\*

P01	**Lead Technician / Supervisor	Hour	200	\$ 75.00	\$ 15,000.00
P02	**Technician	Hour	90	\$ 45.00	\$ 4,050.00
P03	**Operator / Driver (without equipment)	Hour	800	\$ 75.00	\$ 60,000.00
P04	**Teamster/ Driver (without equipment and as specified in Exhibit A, Section 8 (b)(4))	Hour	80	\$ 145.00	\$ 11,600.00
P05	**Laborer (as specified in Exhibit A, Section 8 (b)(5))	Hour	80	\$ 45.00	\$ 3,600.00

The following items shall be inclusive of the Hourly Rates as applicable:

1. The cost of employer payments to or on behalf of employees, travel, compensation insurance premiums, unemployment contributions, social security taxes, Agreement bond premiums, and any other taxes or assessments INCLUDING SALES AND USE TAXES required by law or otherwise shall be included in the Agreement rates and no additional allowance will be made thereof, unless separate payment provision should specifically so provide.
2. All costs associated with materials/supplies as described in Exhibit A, Scope of Work, shall be included in Contractor's personnel rates.
3. Rates include all personal protective equipment (PPE) (level C and D), completion of quarterly reports, chain of custody, and incidentals required to test, identify, reduce contamination, and neutralize waste. Incidental materials include labels, manifests, packing absorbents, drum liners, and incidental testing materials. Tools and small testing equipment includes all incidental hazard equipment, hand tools, hand truck, "Hudson style" compression sprayer, and forklift) to remove, transport and legally dispose of waste substances and other materials generated at Caltrans maintenance facilities or sites otherwise designated by Contract Manager.

**B. Equipment (Hourly Costs cover Non-Operated Equipment as Noted)**

E01	1 ton truck or less	Hour	60	\$ .10	\$ .60
E02	Bobtail Truck	Hour	10	\$ .10	\$ 1.00
E03	40 drum gear truck with lift gate	Hour	80	\$ 150	\$ 4,000.00
E04	Tractor and Trailer minimum 40ft. With lift gate	Hour	80	\$ .10	\$ 8.00
E05	Single bin transport truck	Hour	200	\$ .10	\$ 20.00
E06	Dual bin transport truck	Hour	200	\$ .10	\$ 20.00
E07	Water Truck (min. 1,000 gal capacity)	Hour	1	\$ .10	\$ .10
E08	Pressure Washer	Hour	24	\$ .10	\$ 2.40
E09	Vacuum Truck (110-130 barrel capacity), (Refer to Exhibit A, Section 9 B)	Hour	40	\$ 55.00	\$ 2,200.00
E10	Vacuum Truck (10-100 barrel capacity), (Refer to Exhibit A, Section 9 B)	Hour	40	\$ 1.00	\$ 40.00
E11	Positive Displacement Unit truck (i.e. Vactor truck (Refer to Exhibit A, Section 9 B)	Hour	10	\$ 1.00	\$ 10.00

**A+B+B (1) = Subtotal Cost (Column F, Page 1)** \$ 100,552.10

ATTACHMENT 1  
Bid Proposal for Hazardous Waste Agreement

Column A	Column B	Column C	Column D	Column E	Column F
Item Number	Item Description	Unit of Measure	Est. Quantity	Unit Cost Cost is per unit of measure	Total Amount (unit cost multiplied by estimated quantity)

## C. Materials

M01	Metal drum 55 gallons (new or reconditioned)	Each	350	\$ 75.00	\$ 26,250.00
M02	Metal drum 85 gallons overpac	Each	5	\$ 1.00	\$ 5.00
M03	Tri-wall containers	Each	40	\$ 75.00	\$ 3,000.00
M04	Poly drums, 5 gallons	Each	30	\$ 25.00	\$ 750.00
M05	Poly drums, 30 gallons	Each	20	\$ 1.00	\$ 20.00
M06	Poly drums, 55 gallons	Each	20	\$ 75.00	\$ 1,500.00
M07	Stericycle 1 Qt Sharps Containers (mail back)	Each	1	\$ 1.00	\$ 1.00
M08	Stericycle 1 Gal Sharps Containers (mail back)	Each	1	\$ 1.00	\$ 1.00
M09	20 Cubic Yard Bins (covered)	Per Month (for 11 bins)	24	\$ 2,000.00	\$ 48,000.00
M10	40 Cubic Yard Bins (covered)	Per Month (for 0 bins)			

## D. Incidentals\*

I01	Disposal Fee			actual costs	\$100,000.00
I02	Per Diem			actual costs	\$3,000.00
I03	Lab and incidental (per Exhibit B, Section 6) Costs			actual costs	\$3,000.00

\*Contractor will be reimbursed for the actual costs as noted in I01-I03 (including applicable sales tax) without additional allowance for markup. These costs are to be substantiated by a copy of the appropriately signed invoice verifying the actual costs.

- (1) The above quantities are estimates only and are given as a basis for comparison of bids. No guarantee is made or implied as to the exact quantity that will be needed.
- (2) In case of discrepancy between the unit price and the total set forth for a unit basis item, the unit price shall prevail.
- (3) All line items must include a bid price.
- (4) Any bid may be rejected if it is unreasonable as to price. Unreasonable of Price includes not only the total price of the Bid, but prices for individual line items as well.

<b>C+D = Subtotal Cost</b> (Column F, Page 2)	\$ 185,527.00
<b>TOTAL COST</b> (A - D Subtotals)	\$ 286,079.10